

BAKER BOTTS, LLP

Please type a plus sign (+) inside this box → **[+]**

DEC 19 2003

**POWER OF ATTORNEY OR
AUTHORIZATION OF AGENT**

| | |
|------------------------|-------------------|
| Application Number | 10/656,353 |
| Filing Date | September 5, 2003 |
| First Named Inventor | PERCY HEGER |
| Group Art Unit | |
| Examiner Name | |
| Attorney Docket Number | A35976 |

I hereby appoint:

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21003

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| Name | Registration Number |
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as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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| Address | | | |
| City | State | Zip | |
| Country | | | |
| Telephone | Fax | | |

I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

| | |
|-----------|-----------------------|
| Name | TOBIAS HOERNING |
| Signature | <i>Tobias Hörning</i> |
| Date | 11/17/2003 |

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

*Total of _____ forms are submitted.

DEC 19 2003

BAKER BOTTS LLP

**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

Declaration Submitted with Initial Filing

OR

Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

| | |
|--------------------------|-------------------|
| Att r n y D cket Number | A35976 |
| First Nam d Inv nt r | PERCY HEGER |
| COMPLETE IF KNOWN | |
| Application Number | 10/656,353 |
| Filing Date | SEPTEMBER 5, 2003 |
| Group Art Unit | |
| Examiner Name | |

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHOD FOR DETERMINING THE END POINT FOR A CLEANING ETCHING PROCESS

(Title of the Invention)

the specification of which

is attached hereto

OR

was filed on (MM/DD/YYYY) 09/05/2003 as United States Application Number or PCT International

Application Number 10/656,353 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

| Prior Foreign Application Number(s) | Country | Foreign Filing Date (MM/DD/YYYY) | Priority Not Claimed | Certified Copy Attached? YES | Certified Copy Attached? NO |
|-------------------------------------|---------|----------------------------------|--|--|---|
| 102 41 590.0 | Germany | 09/02/2002 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

DECLARATION — Utility or Design Patent Application

Claim for Benefit of Prior U.S. Provisional Application(s)

I hereby claim the benefit under Title 35, United States Code, § 119(e) of any United States provisional application(s) listed below:

| Provisional Application Number | Filing Date |
|--------------------------------|-------------|
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Claim for Benefit of Earlier U.S./PCT Application(s) under 35 U.S.C. 120

(complete this part only if this is a divisional, continuation or C-I-P application)

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior application(s) in the manner provided by the first paragraph of Title 35, United States Code § 112, I acknowledge the duty to disclose information as defined in Title 37, Code of Federal Regulations, Section 1.56 which occurred between the filing date of the prior applications(s) and the national or PCT international filing date of this application:

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: Customer Number or Bar Code Label 21003 OR Correspondence address below

Name

Address

City

State

ZIP

Country

Telephone

Fax

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

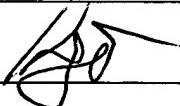
NAME OF SOLE OR FIRST INVENTOR : A petition has been filed for this unsigned inventor

PERCY

HEGER

Given Name
(first and middle [if any])

Family Name
or Surname

Inventor's Signature


10/15/2003
Date

DRESDEN

GERMANY

Residence: City

State

Country

GERMANY

Citizenship

Mailing Address
KAITZER STRASSE 18

DRESDEN
City

State

D-01069
ZIP

GERMANY
Country

NAME OF SECOND INVENTOR:

A petition has been filed for this unsigned inventor

TOBIAS

HOERNING

Given Name
(first and middle [if any])

Family Name
or Surname

Inventor's Signature


10/15/2003
Date

NOSSEN

GERMANY

Residence: City

State

Country

GERMANY

Citizenship

Mailing Address
STRASSE DES FRIEDENS 9

NOSSEN
City

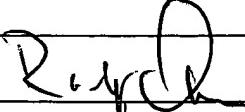
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D-01683
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Country

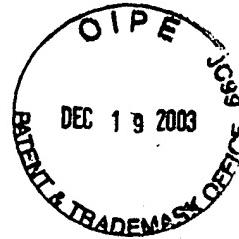
Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

BAKER BOTTS LLPPlease type a plus sign (+) inside this box → **[+]****DECLARATION****ADDITIONAL INVENTOR(S)**
Supplemental Sheet
Page ____ of ____

| | | | |
|---|-------|---|------------------------|
| Name of Additional Joint Inventor, if any: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle [if any]) | | Family Name or Surname | |
| RALF | | OTTO | |
| Inventor's Signature  | | Date 10/15/2003 | |
| KESSELSDORF Residence: City | State | GERMANY Country | GERMANY Citizenship |
| ZU DEN KLEINGAERTEN 35 Mailing Address | | | |
| Mailing Address | | | |
| KESSELSDORF City | State | D-01723 ZIP | GERMANY Country |
| Name of Additional Joint Inventor, if any: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle [if any]) | | Family Name or Surname | |
| | | | |
| Inventor's Signature | | Date | |
| Residence: City | State | Country | Citizenship |
| Mailing Address | | | |
| Mailing Address | | | |
| City | State | ZIP | Country |
| Name of Additional Joint Inventor, if any: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle [if any]) | | Family Name or Surname | |
| | | | |
| Inventor's Signature | | Date | |
| Residence: City | State | Country | Citizenship |
| Mailing Address | | | |
| Mailing Address | | | |
| City | State | ZIP | Country |

BAKER BOTTS LLP

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**POWER OF ATTORNEY OR
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| Application Number | 10/656,353* |
| Filing Date | September 5, 2003 |
| First Named Inventor | PERCY HEGER |
| Group Art Unit | |
| Examiner Name | |
| Attorney Docket Number | A35976 |

I hereby appoint:

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as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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The above-mentioned Customer Number.

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| City | State | Zip | |
| Country | | | |
| Telephone | Fax | | |

I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.

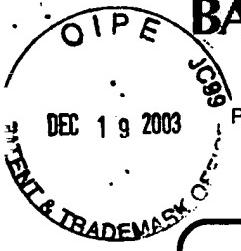
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

| | |
|-----------|-------------|
| Name | PERCY HEGER |
| Signature | |
| Date | 11/17/2003 |

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

*Total of _____ forms are submitted.

**BAKER BOTTS LLP**

DEC 19 2003

Please type a plus sign (+) inside this box → **[+]****POWER OF ATTORNEY OR
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| Application Number | 10/656,353 |
| Filing Date | September 5, 2003 |
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| Group Art Unit | |
| Examiner Name | |
| Attorney Docket Number | A35976 |

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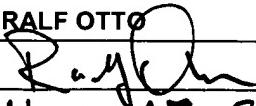
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I am the:

 Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

| | |
|-----------|---|
| Name | RALF OTTO |
| Signature |  |
| Date | Nov. 17, 2003 |

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

 *Total of _____ forms are submitted.